

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P95000641944**
1. Corporation Name

E & C AIRCRAFT SERVICE, INC.

Principal Place of Business

**7885 N.W. 55th Street
Miami, FL 33166**

Mailing Address

2. Principal Place of Business

21 **7885 N.W. 55th Street**

22 Suite, Apt. #, etc.

23 City & State
Miami, FL

24 Zip
33166

25 Country
Dade

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

3. Date Incorporated or Qualified
May 30, 1995

3a. Date of Last Report
1995

4. FPI Number

65-058-7166

Applied For

Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐ **\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

CARLOS LINERO

**6750 N.W. 186th Street, #308
Miami, FL 33015**

10. Name and Address of New Registered Agent

81 Name
CARLOS LINERO

82 Street Address (P.O. Box Number is Not Acceptable)
6750 N.W. 186th Street, #308

83

84 City
Miami,

FL

85 Zip Code
33015

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Carlos E. Linero **CARLOS LINERO**

6-3-96

DATE

12. OFFICERS AND DIRECTORS

TITLE **President/Treasurer** ☐ DELETE
NAME **CARLOS LINERO**
STREET ADDRESS **6750 N.W. 186th Street, #308**
CITY-ST-ZIP **Miami, FL 33015**

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

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STREET ADDRESS

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TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **Vice-President/Sec.** ☐ Change ☒ Addition
1.2 NAME **EFRAIN ANTONIO ZAPATA**
1.3 STREET ADDRESS **1805 Sans Souci Blvd., #501**
1.4 CITY-ST-ZIP **North Miami, FL 33181**

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

**800001865718
-06/18/96--01116--039**

*****225.00**

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Carlos E. Linero
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6-3-96

DATE

(305)-418-4387
TELEPHONE NUMBER

CR2E034 (12/95)